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FROM: Pattric J. Rawlins

RE: U.S. Patent Application No. 10/085,773
MEMORY CONFIGURATION FOR A WIRELESS COMMUNICATION DEVICE
Attorney Docket No. UTL 00080

CC:**MESSAGE:**

Please find attached the Authorization to Act in a Representative Capacity in the above identified application.

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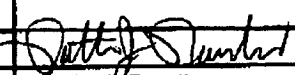
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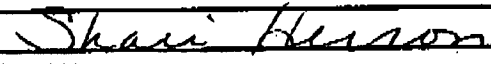
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/085,773	RECEIVED CENTRAL FAX CENTER DEC 2 2004
	Filing Date	02/26/2002	
	First Named Inventor	Robert Bruce Ganton	
	Art Unit	2186	
	Examiner Name	H. B. Patel	
Total Number of Pages in This Submission	Attorney Docket Number	UTL 00080	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Authorization to Act in a Representative Capacity
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Procopio, Cory, Hargreaves & Savitch LLP		
Signature			
Printed name	Patricia J. Rawlins		
Date	December 21, 2004	Reg. No.	47,887

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Signature	
Typed or printed name	Shari Herron
Date	December 21, 2004

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AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of:

Robert Bruce GANTON

Application No.

10/085,773

Filed:

February 26, 2002

Title:

MEMORY CONFIGURATION FOR A WIRELESS COMMUNICATIONS DEVICE

Attorney Docket No.

UTL 00080

Art Unit:

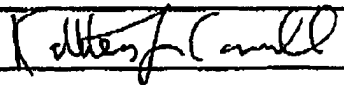
2186

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Patric J. RAWLINS Procopio Cory Hargreaves & Savitch LLP 530 B Street, Suite 2100 San Diego, CA 92101 (619) 238-1900	47,887

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Signature		Date	12/14/2004
Name	Kathleen L. CONNELL	Registration No., if applicable	45,344
Telephone	(858) 882-2169		

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